

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	2 Serial/Patent #
3 Please refund the following fee(s):	
Filing	4 PAPER NUMBER
Amendment	5 DATE FILED
Extension of Time	6 AMOUNT
Notice of Appeal/Appeal	
Petition	
Issue	
Cert of Correction/Terminal Disc.	
Maintenance	
Assignment	
Other	
7 TOTAL AMOUNT OF REFUND	
8 TO BE REFUNDED BY: 06/24/2004 6536022A93	
Treasury Check	
Credit Card Refund Total: \$250.00 Credit Deposit A/C #:	
9 AB Exp.: XXXXX XXXX1254	
10 REASON:	
Overpayment	
Duplicate Payment	
No Fee Due (Explanation):	
11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME: _____	
TITLE: _____	
SIGNATURE: _____	
PHONE: _____	
OFFICE: **** THIS SPACE RESERVED FOR FINANCE USE ONLY: 02 FC:2632 -250.00 OP	
APPROVED: _____ DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B